

RFP #720C-04088-07R RREVENUE MAXIMIZATION SERVICES

Questions and Answers #1

Question #1: Item A refers to the Cost Reporting Mechanism. Is this the information contained on the MAP-128, the Cost Report for Intermediate Care/Mental Retardation Facilities or on a different form?

Answer: DMHMRSAS uses standard cost reporting formats as required by CMS and Virginia's Department of Medical Assistance Services.

Question #2: Items 4 and 5 refer to the Medicaid Upper Limit Calculation and the Medicaid State Plan changes. I cannot find either of those terms on any web site. Please advise where I can get more information about them.

Answer: The term Medicaid Upper Payment Limits is a universal term used in rate computation process.

Question #3: Item #9 refers to services not previously identified at the VCBR. Does VCBR stand for the Virginia Center for Behavioral Rehabilitation? Does this item refer only to services not previously identified at that location only, no other locations?

Answer: VCBR does stand for Virginia Center for Behavioral Rehabilitation. This item is location specific.

Question #4: Item IX, Method of Payment, on page 15 states "All fees will be based on net gain to the purchasing agency and/or net gain to the Commonwealth of Virginia." If we find ways to increase all billings and revenue, including from Medicaid, those additional revenues would represent a net loss to the Commonwealth through increased Medicaid payouts. Would that not work against our bid?

Answer: Net gain to the purchasing agency and/or net gain to the Commonwealth relates to gains in revenues only.

Question #5: I did log on to the web site that would have any answers but I did not see any previously answered questions. Were there any or am I missing them?

Answer: This is the first set of questions received and answers posted to our web site.

